DRAFT
Summary Proceedings

Health Information Infrastructure Board Meeting (HIIAB)
Clarion Sea Tac Hotel
Thursday, April 27, 2006, 9:00 a.m. to 4:30 p.m.

Members Present
Wendy Carr, V. Marc Droppert, James Hereford, Jeffrey Hummel, Hugh Maloney, Richard Onizuka, Marcus Pierson, Gary Robinson, Ed Singler, and Alexis Wilson.

HCA Board Staff and Consultant
Juan Alaniz, Ruth McIntosh and Dr. William Yasnoff

Board Members Not Present
Thomas Fritz and David Masuda

Interested Parties Attending
Tom Byron, Washington State Hospital Association; John Christiansen, Christiansen At Law; Anton Cooper, Washington State Health Care Authority; David Deichert, WANP; Andy Fallat, Foundation for the Healthcare Quality; Nancy Fisher, Washington State Health Care Authority; Lori hack, California Regional Health Information Organization; Sherri McDonald, Thurston County Public Health; Steven MacDonald, Washington State Department of Health; Steve Moe, Consultant; Bob Perna, Washington State Medical Association; Sandy Rominger, The Boeing Company; Frank Westrum, Washington State Department of Health; and David Weyburn, The Boeing Company.

Call to Order
The meeting was called to order at 9:20 a.m. by Chair, V. Marc Droppert.

Activity Updates
Juan Alaniz provided updates for the Board, mentioning the CHITA Safety Coalition conference to be held in June. Marc Droppert will be a guest speaker to discuss in a forty-five presentation. Marc Droppert will present a HIIAB and related activities update at the CHITA Conference, to include information on the town hall meetings, and other findings on HealthIT.

Juan Alaniz attended the annual Connecting Communities Conference in Washington D.C. The conference was very informative and educational and provided the opportunity to network and share ideas with other states on their approaches and progress. While there, he met with Lori Hack, from CalRHIO and asked her to be a guest speaker for the April HIIAB session. He also had informal discussions with other states on the difficulty of engaging consumers and identifying what the scope of the concept should be within the HealthIT dimension. Other participants were very interested in getting results of the planned town hall meetings with consumers and providers. States with similar objectives commented on the structure of the HIIAB and HIISAC and thought that such an approach

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was a good idea to assure broad and inclusive participation of affected parties. He mentioned the value of workshops from states or projects on how they had approached potential solutions.

Adoption of the agenda
All agenda items were adopted by Marc Droppert, the Board Chair with some time slots changed to meet the meeting session requirements.

Other Assignments and Reports
Wendy Carr, Consumer representative, provided a summary of the Bellingham consumer round table discussion. There were eight Shared Care PHR participants and several staff from the Pursuing Perfection Project that helped to develop the PHR. These consumers have chronic health conditions. One notable message from this consumer group was that individuals need to better control of their own health and be responsible for their health care. The forum was an informal discussion with a written follow up to follow.

Some of the comments and observations form the group included:
- Current Health Care is into control vs. consumer empowerment
- The Shared Care Plan or a PHR is the vehicle or a "car" for self-care, but needs the road or highway, the health information infrastructure to be effective
- EMR vs. PHR- both are best when used together; can not work one without the other
- The current model is emergency care rather than health care
- They define providers broadly and recommend including naturopaths and alternative medicine providers in a health information community

Marc Droppert asked how the consumer group sees the "Who should pay" issue? Consumers had mentioned that it costs more now not to have EMRs. Consumers stated they were willing to pay for a PHR, but mixed reviews if it will pay for the doctor's EMR without access to see their information. Some also felt that the larger insurance companies will be in a position to pay for this.

Other comments were to have the Department of Social and Health Services and public health insurance programs pay for recipients under their health care coverage in order to not have this as a barrier for uninsured or low-income individuals. Other suggestions included establishing a fee, such as a PHR start up fee and incorporated in the delivery cost. They suggested having penalty fees in place for the folks who file their Medicare enroll pass the deadline to help fund a PHR. A written report on the session will be made available on the HCA web site.

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<u>Lori Hack, CEO Interim - CalRHIO Experiences and Lessons Learned: Implications for WA State</u>
Lori Hack began her presentation with some background on CalRHIO's start and organization. She provided a back drop on the current climate within California health care system operates in, their organizational vision, directions and some of the challenges in the future for CalRHIO.

A focus of CalRHIO is on HealthIT seeking the most efficient and cost effective ways to accomplish data exchange for the clinical side. They are constantly seeking and forging collaborative efforts with other states, and CalRHIO looks to increase and improve the patient safety demands.   These efforts do not foresee any significant federal funding support, but that states must find and use collaborative strategies to move the HealthIT agenda.

Lori described the CalRHIO process and dynamic in selection of their board members. CalRHIO initially proposed a group of 12 members that almost doubled and represent the variety of stakeholders across the health care system spectrum. The HIIAB noted that the draft governance proposal in discussion is considering a seventeen member governance board.

Lori Hack described and answered on CalRHIO's role as an umbrella organization and as a trusted third party with transparent processes. In addition to the governance role, CalRHIO is also a convener, a communication vehicle and provides education. CalRHIO also acts as a central hub for activities for coordination at a local, regional, and national level. Rather than all of California's communities working independently each regional area has a representative working with CalRHIO to coordinate efforts.

CalRHIO has identified a cost share approach for PHRs.   Some of CalRHIO's current statewide projects include:
- Emergency Department Linkages
- Medical Management
- Personal Health Records
- Infrastructure
- Administrative Efficiencies

CalRHIO sees the need to have these projects overlap on the business case for sustainability. Lori noted similar challenges for CalRHIO as in Washing State such as how to pay for the initial infrastructure and in making it self sustaining. There was significant Board engagement and questions for Lori. CalRHIOOverview.pdf

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Discussion: Technical and Privacy Approaches to Building a Health Information Infrastructure
Jeff Hummel and John Christensen prepared a presentation on the Markle Foundation technical and privacy principles, or the "framework

The common framework discusses nine principles with basic terminology to include legal implications that set boundaries. The policies and procedures in some levels need to be controlled, by the consumer or a common company or individuals to protect and be as a safe guard.   Christiansen indicated that it will be a minimum requirement for entities to be authorized to use for technology. He stated that the common principles outlined by the Connecting for Health organization are good and recommends it is a first step approach towards defining parameters.

Jeff Hummel led a discussion and demonstrated connectivity between different entities, such as Group Health Cooperative and Inland Northwest Health Systems. He provided diagrams and explained the connectivity flow.

Several questions were addressed to him on differences between this presentation and the February presentation diagrams on architecture, ArchitectureoftheWashingtonState. Jeff Hummel explained the differences between models and limitations of previous concepts.

There was significant discussion and consensus on elements of an alternative centralized data repository, and that included features of a concept that was referred to as a "medical record home." The HIIAB requested that the consensus concept be captured and documented for further discussion at the May work session.

Interested Parties Comments
Sherri McDonald, Thurston County Public Health
Not audible.

Steve Moe, Consultant
The Board could continue discussions around the PHR, and how will it work.

Assignment: From Discussion Draft a list of Proposed Requirements for the Washington State HII
The list outlined the proposed requirements from the preliminary report and other documents, like the target statement. Bill Yasnoff suggested going through the list one by one and making recommendation changes accordingly. Yasnoff made all of the edits as discussed and will send any additional changes thoughts to Juan prior to the next meeting

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in May. The updated version will be distributed at the May 2006 meeting.
ProposedRequirementsWAState.

Assignment: From the Discussion Draft a Governance Proposal Detail Concept Paper
From the last HIIAB meeting it was assigned to have a sub-group work on draft a concept recommendation for the governance proposal. The sub-group board members were Chair, Marc Droppert, Richard Onizuka, Bill Yasnoff, Tom Fritz and Juan Alaniz.

The proposed draft was submitted to the Board with final discussion at the May work session. DraftProposalGovernance-Yasnoff.

Timeline Status and Priorities Discussion
Juan Alaniz gave an overview and discussed the project timeline status. It appears the board is close to the targets outlined on the schedule. He recommended a focused effort on priority items that the Board can attend to in May and June.

He recommended five standing combined sub-committees composed of both HIIAB and HIISAC members in order to streamline process time and work more efficiently. The work of the Board is now at a point that will require more focused study, research and work in key areas in order to complete the report and associated tasks.
- Strategy and Implementation
- Finance & Sustainment
- Consumer
- Organization and Governance
- Technical and Infrastructure
- Others as needed

The Board determined that the Strategy and Implementation was the purview of the Board and approved the four standing sub-committees to be established.

Interested Parties Comments
None.

Other Assignments and Reports
Bill Yasnoff will incorporate the required proposal changes as discussed to reflect the recommendations from the Board. The board will further examine them and will bring forth additional discussion at the next HIIAB meeting in May. The Board will follow up on a discussion on the governance proposal; explore potential "investors" and how consumer representatives participate in the concept. HIIAB and HIISAC members will let Juan Alaniz know what sub-committee(s) they would like to serve on.